

Pathways Career Development Enrollment Form

Please Print All Information

Last Name _____ First Name _____

Middle Initial or Name _____

Home Address _____

City _____ State _____ Zip Code _____

Home Parish _____ Home Phone (____) _____

Email Address _____

Information about you:

Last four digits of Social Security Number ____ ____ ____ ____ Your gender F M

Your ethnic background (Check all that apply)

_____ Acadian American	_____ African American
_____ Asian American	_____ Caucasian American
_____ European American	_____ Hispanic American
_____ Native American	_____ Other _____

Is English your primary language? Yes No Do you speak another language fluently? Yes No If yes, what language? _____

Your Educational Background:

Did you graduate from High School? Yes No

If no, have you passed the GED? Yes No

Have you attended college? Yes No

If yes, for how long? _____

Did you graduate from college? Yes No

If yes, what was your major? _____

Do you have a graduate degree? Yes No

If yes, what was your major? _____

Have you received the Child Development Associate (CDA) Yes No

Are you currently enrolled in a CDA Training Program? Yes No

If yes, when do you expect to apply for the CDA? _____

Do you have some other type of special training? Yes No

If yes, what training? _____

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Information about your Early Childhood Work Experience:

Are you currently working in the early childhood field? Yes No

If yes, where do you work? (Name of School, Center, or Family Child Care Home)

Work Address _____

City _____ State _____ Zip Code _____

Work Parish _____ Work Phone? (_____) _____

Job Title _____

When did you begin working in this job? (Month & Year) _____

Before working in this job, did you work in another child care center or family child care home? Yes No

What is the total number of years that you have worked in a child care center or family child care home? _____

What age groups(s) do you work with now? Check all that apply

_____ Infants (0-12 months)

_____ One year olds

_____ Two year olds

_____ Three year olds

_____ Four year olds

_____ School age children (5-7)

_____ School age children (8-12)

Your signature below verifies that this information is accurate and can be documented.

Signature _____

Date _____

This information will be used to enroll you in the Pathways Child Care Career Development System. The Pathways Career Development System is a means of documenting your qualifications and achievement in the early childhood field. As you receive additional training, you will receive certificates and other recognition of your commitment to providing a quality program for young children.

This project is funded by the Department of Social Service Office of Family Support as an important step in improving staff qualifications and recognition in the early childhood field. This project will help you to be responsible for your own career and achievement and recognize your important skills and knowledge and the value of the work that you do.

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